## Retail Food Inspection Report

Floyd County Health Department Telephone (812) 948-4726

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Establishment Name MAC'S HIDEAWAY					Telephone Number  Est 812-945-4256	Date of Inspection	ID#	
Address 1636 SLATE RUN ROAD, NEW ALBANY IN 47150					Own (502) 821-9697	11/04/2021		
Owner DANIEL J MCKINLEY					Purpose X Routine	Follow Up	Released 11/03/2021	
Owner's Address 2294 EDWARDSVILLE-GALENA RD GEORGETOWN, IN 47122					Follow-up Complaint			
Person in Charge TRAVIS BARNETT					Pre-Operational			
Responsible Person's Email DMCKIN9534@GMAIL.COM					Temporary HACCP			
Certified Food Handler TRAVIS BARRETT					Other (list)			
CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C" VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRAIVE COLUMN MARKED AS "R"								
Section #	C NC R Narrative					То Ве С	orrected	
191	Х		Keep cheese in	Observed block of cheese stored in a plastic container without a date mark.  1 day  Keep cheese in original packaging with packaging datemark if stored in a secondary container.				
295		X		Observed film buildup in soda gun holster at bar. Check drain line for Today				
324		Х	containing mole	Observed 5 gallon bucket used for to collect drain line water to be full and containing mold. Dump bucket (1 day). Drain line should be extented to a permanent floor drain. (1 week)				
413		X	against the entry		10 days	·		
431		X	observed dirty entrance.	bucket containing an unk	nown liquid at bar near kitchen	Correcte	d	
Summary of Vio	olations	(	C 1 NC	4 R 0				
-					11 / 2 1444	* , 1\		
Received by (nar	me and ti	tte prin	itea):		Inspected by (name and title printed): Thomas Snider CFS			
Received by (sig	nature):				Inspected by (signature):			
cc:				cc:		cc:		